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PTO/SB/50 (12/89)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	Attorney Docket No.	1945-104R
	First Named Inventor	K. Aoki
	Original Patent Number	5,535,430
	Original Patent Issue Date (Month/Day/Year)	July 9, 1996
	Express Mail Label No.	
	Total Pages	100

APPLICATION FOR REISSUE OF:
(check applicable box)

☒

Utility Patent

☐

Design Patent

☐

Plant Patent

APPLICATION ELEMENTS

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification and Claims (amended, if appropriate)
3. ☒ Drawing(s) (proposed amendments, if appropriate)
4. ☒ Reissue Oath / Declaration (original or copy)
(37 CFR 1.175)(PTO/SB/51 or 52)
5. Original U.S. Patent
☒ Offer to Surrender Original Patent (37 CFR 1.178)
(PTO/SB/53 or PTO/SB/54)
or
☐ Ribboned Original Patent Grant
☐ Affidavit / Declaration of Loss (PTO/SB/55)
6. Original U.S. Patent currently assigned?
☒ Yes ☐ No
(If Yes, check applicable box(es))
☒ Written Consent of all Assignees (PTO/SB/53 or 54)
☒ 37 CFR 3.73(b) Statement ☒ Power of Attorney

ACCOMPANYING APPLICATION PARTS

7. ☐ Transfer drawings from Patent File
8. ☒ Foreign Priority Claim (35 USC 119)
(if applicable)
9. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
10. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
11. ☐ Small Entity Statement filed in prior application, Status still proper and desired
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
14. ☐ Other:

15. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

or ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

NAME	Vincent M. DeLuca				
ADDRESS	Rothwell, Figg, Ernst & Kurz 555 13th Street, NW, Suite 701 East				
CITY	Washington	STATE	D.C.	ZIP CODE	20004
COUNTRY	United States	TELEPHONE	202 783 6040	FAX	202 783 6031

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL (Large Entity)		Complete if Known	
		Patent Number	5,535,430
		Issue Date	July 9, 1996
		First Named Inventor	K. Aoki
		Group Art Unit	
		Examiner Name	
Total Amount of Payment	(\$ 834.00)	Attorney Docket Number	1945-104R

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Kurz

☒ Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Charge for the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2. ☒ Payment Enclosed: Check

FEE CALCULATION
1. FILING FEE

Fee Description	Fee Code	Fee Paid
<input type="checkbox"/> Utility Filing Fee	101	790
<input type="checkbox"/> Design Filing Fee	106	330
<input type="checkbox"/> Plant Filing Fee	107	540
<input checked="" type="checkbox"/> Reissue Filing Fee	108	790
<input type="checkbox"/> Provisional Filing Fee	114	150
SUBTOTAL		\$790

2. CLAIMS

	Fee from Extra	below	Fee Paid
Total Claims	22 - 20 =	2 x \$22	= 44.00
Independent Claims	2 - 3 =	0 x 82	= --0--
Multiple Dependent Claims		+ 270	= --0--

SUBTOTAL \$ 44.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Description	Fee Code	Fee Paid
<input type="checkbox"/> Surcharge - late filing fee or oath	105	130
<input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet	127	50
<input type="checkbox"/> Non-English specification	139	130
<input type="checkbox"/> For filing a request for reexamination	147	2,520
<input type="checkbox"/> Requesting publication of SIR prior to Examiner action	112	920
<input type="checkbox"/> Requesting publication of SIR after Examiner action	113	1,840*
<input type="checkbox"/> Extension for reply within first month	115	110
<input type="checkbox"/> Extension for reply within second month	116	400
<input type="checkbox"/> Extension for reply within third month	117	950
<input type="checkbox"/> Extension for reply within fourth month	118	1,510
<input type="checkbox"/> Extension for reply within fifth month	128	2,060
<input type="checkbox"/> Notice of Appeal	119	310
<input type="checkbox"/> Filing a brief in support of an appeal	120	310
<input type="checkbox"/> Request for Oral Hearing	121	270
<input type="checkbox"/> Petition to institute a public use proceeding	138	1,510
<input type="checkbox"/> Petition to revive -unavoidable	140	110
<input type="checkbox"/> Petition to revive - unintentional	141	1,320
<input type="checkbox"/> Utility issue fee (or reissue)	142	1,320
<input type="checkbox"/> Design issue fee	143	450
<input type="checkbox"/> Plant issue fee	144	670
<input type="checkbox"/> Petitions to the Commissioner	122	130
<input type="checkbox"/> Petitions related to provisional applications	123	50
<input type="checkbox"/> Submission of Information Disclosure Statement	126	240
<input type="checkbox"/> Recording each patent assignment per property (times number of properties)	581	40
<input type="checkbox"/> Filing a submission after final rejection (37 CFR .129(a))	146	790
<input type="checkbox"/> For each additional invention to be examined (37 CFR 1.129(b))	149	790

Other fee (specify)

☐

SUBTOTAL \$

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Vincent M. DeLuca, Reg. No. 32,408				
SIGNATURE	Vincent M DeLuca	DATE	7/8/98	DEPOSIT ACCOUNT USER ID	02-2135